

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO

IN RE:

CARLOS I. MATOS MORALES
BARBARA I. TORRES CAPP
DEBTORS

CASE NUM.: 11-01469 ESL

CHAPTER 13 (ASSET CASE)

CERTIFICATE OF SERVICE

TO THE HONORABLE COURT:

COMES (S) now Debtor(s) represented by the undersigned
counsel and respectfully allege(s) and pray(s) as follows:

1. The undersigned attorney hereby a certificate that
has notified all creditors and persons with interest as per
master address list of the Chapter 13, **dated 3/18/2011**.

WHEREFORE, it is respectfully requested from this
Honorable Court to take notice of this service.

In San Juan, Puerto Rico, this 18th, day of March 2011.

RESPECTFULLY SUBMITTED.

/S/MARILYN VALDES ORTEGA
MARILYN VALDES ORTEGA
USDC PR 214711
P.O.Box 195596
San Juan, PR 00919-5596
Tel. (787) 758-4400
Fax. (787) 763-0144
E-mail: valdeslaw@prtc.net

United States Bankruptcy Court
District of Puerto Rico

IN RE:

MATOS MORALES, CARLOS IVAN & TORRES-CAPPA, BARBARA ISABEL

Debtor(s)

Case No. 11-01469-ESL

Chapter 13

CHAPTER 13 PAYMENT PLAN

1. The future earnings of the Debtor(s) are submitted to the supervision and control of the Trustee and the Debtor(s) shall make payments to the Trustee directly by payroll deductions as hereinafter provided in the PAYMENT PLAN SCHEDULE.
2. The Trustee shall distribute the funds so received as hereinafter provided in the DISBURSEMENT SCHEDULE.

PLAN DATED: <u>3/18/2011</u>	<input type="checkbox"/> AMENDED PLAN DATED: _____																																						
<input type="checkbox"/> PRE <input type="checkbox"/> POST-CONFIRMATION	Filed by: <input type="checkbox"/> Debtor <input type="checkbox"/> Trustee <input type="checkbox"/> Other																																						
<p>I. PAYMENT PLAN SCHEDULE</p> <table border="1"> <tr> <td>\$</td> <td>560.00</td> <td>x</td> <td>60</td> <td>= \$</td> <td>33,600.00</td> </tr> <tr> <td>\$</td> <td></td> <td>x</td> <td></td> <td>= \$</td> <td></td> </tr> <tr> <td>\$</td> <td></td> <td>x</td> <td></td> <td>= \$</td> <td></td> </tr> <tr> <td>\$</td> <td></td> <td>x</td> <td></td> <td>= \$</td> <td></td> </tr> <tr> <td>\$</td> <td></td> <td>x</td> <td></td> <td>= \$</td> <td></td> </tr> <tr> <td colspan="6" style="text-align: center;">TOTAL: \$ 33,600.00</td> </tr> </table> <p>Additional Payments: \$ _____ to be paid as a LUMP SUM within _____ with proceeds to come from: _____</p> <p><input type="checkbox"/> Sale of Property identified as follows: _____</p> <p><input type="checkbox"/> Other: _____</p> <p>Periodic Payments to be made other than, and in addition to the above: \$ _____ x _____ = \$ _____</p> <p>PROPOSED BASE: \$ 33,600.00</p> <p>III. ATTORNEY'S FEES (Treated as § 507 Priorities)</p> <p>Outstanding balance as per Rule 2016(b) Fee Disclosure Statement: \$ 2,805.00</p>		\$	560.00	x	60	= \$	33,600.00	\$		x		= \$		\$		x		= \$		\$		x		= \$		\$		x		= \$		TOTAL: \$ 33,600.00						<p>II. DISBURSEMENT SCHEDULE</p> <p>A. ADEQUATE PROTECTION PAYMENTS OR \$ _____</p> <p>B. SECURED CLAIMS: <input checked="" type="checkbox"/> Debtor represents no secured claims. <input type="checkbox"/> Creditors having secured claims will retain their liens and shall be paid as follows:</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> Trustee pays secured ARREARS: Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ 2. <input type="checkbox"/> Trustee pays IN FULL Secured Claims: Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ 3. <input type="checkbox"/> Trustee pays VALUE OF COLLATERAL: Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ <p>4. <input type="checkbox"/> Debtor SURRENDERS COLLATERAL to Lien Holder:</p> <p>5. <input type="checkbox"/> Other:</p> <p>6. <input type="checkbox"/> Debtor otherwise maintains regular payments directly to:</p> <p>C. PRIORITIES: The Trustee shall pay priorities in accordance with the law. 11 U.S.C. § 507 and § 1322(a)(2)</p> <p>D. UNSECURED CLAIMS: Plan <input type="checkbox"/> Classifies <input checked="" type="checkbox"/> Does not Classify Claims.</p> <ol style="list-style-type: none"> 1. (a) Class A: <input type="checkbox"/> Co-debtor Claims / <input type="checkbox"/> Other: <input type="checkbox"/> Paid 100% / <input type="checkbox"/> Other: Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ 2. Unsecured Claims otherwise receive PRO-RATA disbursements. <p>OTHER PROVISIONS: (Executory contracts; payment of interest to unsecureds, etc.) TRUSTEE TO PAY ATTORNEY'S FEES BEFORE ANY SECURED OR PRIORITY CREDITOR 11 USC 330.</p> <p>FAILURE TO TIMELY OBJECT TO THIS PLAN CONSTITUTES A WAIVER OF THE EQUAL MONTHLY AMOUNT METHOD OF PAYMENT UNDER 11 USC 1325(a)(5).</p> <p>TAX REFUNDS, IF ANY ARE RECEIVED BY DEBTOR, WILL BE TENDERED TO THE TRUSTEE AS A PERIODIC PAYMENT TO FUND THE PLAN UNTIL PLAN COMPLETION IN ADDITION TO PAYMENTS PROVIDED HEREIN. IF DEBTOR(S) NEED TO USE ANY PART OF THESE FUNDS, PROPER AUTHORIZATION WILL BE SOUGHT THE COURT FOR SUCH PURPOSE.</p>	
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TOTAL: \$ 33,600.00																																							

Attorney for Debtor Mari M. Valdés Ortega Law Offices

Phone: (787) 758-4400

I HEREBY CERTIFY: That I electronically filed the foregoing with the Clerk of the Court using the CM/ECF System which will send notification of such filing to the following:

11-01469-ESL13 Notice will be electronically mailed to:

MONSITA LECAROZ ARRIBAS
ustpregion21.hr.ecf@usdoj.gov

ALEJANDRO OLIVERAS RIVERA
aorecf@ch13sju.com

MARILYN VALDES ORTEGA on behalf of Debtor CARLOS MATOS MORALES
valdeslaw@prtcl.net

I HEREBY CERTIFY: That I have mailed by regular mail to all creditors listed.

11-01469-ESL13 Notice will not be electronically mailed to:

BANCO POPULAR DE PR
PO BOX 366818
SAN JUAN, PR 00936-6818

BANCO SANTANDER DE PR
PO BOX 362589
SAN JUAN, PR 00936

BANK OF AMERICA
PO BOX 1598
NORFOLK, VA 23501

DEPARTAMENTO DE HACIENDA
PO BOX 9024140
OFICINA 424 B
SAN JUAN, PR 00902-4140

DEPARTAMENTO DEL TRABAJO
AVE MUÑOZ RIVERA 505
HATO REY, PR 00918

FEDERAL LITIGATION DEPT OF
JUSTICE
PO BOX 9020192
SAN JUAN, PR 00902-0192

INTERNAL REVENUE SERVICE
PO BOX 7346
PHILADELPHIA, PA 19101-7346